Rec'd PAP/PTO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)			ATTORNEY'S DOCKET NUMBER F7647 (V)			
As a below named inventor, I hereby	declare that:					
My residence, post office address and	I citizenship are as stated below next to	my name,				
	le inventor (if only one name listed below and for which a patent is sought on the		(if plural names are listed below)			
	SPOONABLE WATER-CONTINUOU	S ACIDIFIED FOOD PRODUCT				
the specification of which (check only	one item below):					
is attached hereto.						
was filed as United States applicat and was amended on	ion Serial No(if applicable)	on				
	plication PCT/EP03/02750	on 17 March	2003			
I hereby state that I have reviewed an amendment referred to above.	d understand the contents of the above-	identified specification, including the c	laims, as amended by any			
I acknowledge the duty to disclose info Regulations, §1.56(a).	ormation which is material to the patenta	ability of this application in accordance	with Title 37, Code of Federal			
I hereby claim foreign priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:						
PRIOR FOREIGN/PCT APPL	ICATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C	. 119:			
COUNTRY (if PCT indicate PCT)	COUNTRY APPLICATION NUMBER DATE OF FILING PRIORITY CLAIMED					
EUROPE	02252704.8	17 April 2002	⊠ YES □ NO			
			YES NO			
	☐ YES ☐ NO					
I hereby claim the henefit under Title	35 United States Code 8120 of any U	Inited States application(s) or PCT inte	mational application(s) designating			

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that /those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations §1.56 (a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120.

U.S. APPLICATION(S)		STATUS (CHEC	CK ONE)	
U.S. APPLICATION NUMBER	U.S Filing Date	PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NUMBER	CT APPLICATION NUMBER PCT Filing Date U.S Serial Numbers Assigned (if any)		ny)	
PCT/EP03/02750	17 March 2003			

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (continued) (includes Reference to PCT International Applications)

ATTORNEY DOCKET NUMBER F7647 (V)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

CUSTOMER NUMBER: 000201)

Direct all correspondence to: CUSTOMER NUMBER 000201

201	1-	1
ZUI	1	<i>. ~</i>

Full Name of Inventor	Family Name	First Given Name	Second Given Name
	BOL	Arien	
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
·	<u>Vlaardingen</u>	NLX	The Netherlands
Post Office Address	Post Office Address Olivier van Noortlaan 120	City Vlaardingen	State & Zip Code/Country 3133 AT The Netherlands

202 2-00

Full Name of Inventor	Family Name	First Given Name	Second Given Name
· · · · · · · · · · · · · · · · · · ·	FOSTER	Timothy	John
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
•	<u>Bedford</u>	Bedfordshire G-BX	United Kingdom
Post Office Address	Post Office Address Shambrook	City Bedford	State & Zip Code/Country MK44 1LQ United Kingdom

203 3-00

Full Name of Inventor	Family Name	First Given Name	Second Given Name
	LUNDIN	Leif	<u>Orian</u>
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
,	Bedford	Bedfordshire GBX	United Kingdom
Post Office Address	Post Office Address Shambrook	City	State & Zip Code/Country
		Bedford	MK44 1LQ United Kingdom

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such wilful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 201  Ar Jew Bot	Signature of Inventor 202	Signature of Inventor 203
Date 7/9/2064	Date 08/09/2004.	Date 09/09/2004

15 OCT 2004

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (continued) (includes Reference to PCT International Applications)

ATTORNEY DOCKET NUMBER F7647 (V)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

**CUSTOMER NUMBER: 000201** 

Direct all correspondence to: CUSTOMER NUMBER 000201

			٠,
204	-4	-OC	ノ

Full Name of Inventor	Family Name	First Given Name	Second Given Name
	PELAN	<u>Barbara</u>	Margaretha
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Vlaardingen	NLX.	The Netherlands
Post Office Address	Post Office Address Olivier van Noortlaan 120	City	State & Zip Code/Country
		Vlaardingen	3133 AT The Netherlands

005	5-00
205	

Full Name of Inventor	Family Name	First Given Name	Second Given Name
	REIFFERS-MAGNANI	Christel	Karine
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
Citizenship	Vlaardingen_	JR-X	France
Post Office	Post Office Address	City	State & Zip Code/Country
Address	Olivier van Noortlaan 120	Vlaardingen	3133 AT The Netherlands

## 206

Full Name of Inventor	Family Name	First Given Name	Second Given Name
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
Post Office Address	Post Office Address	City	State & Zip Code/Country

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such wilful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 204	Signature of Inventor 205	Signature of Inventor 206
Barbara Kargaretha Cathariza Felan	Christel Reiffers-	
Date 12/09/2004	Date 8(9(2004)	Date